## ARIZONA CORPORATION COMMISSION UTILITIES DIVISION

#### ANNUAL REPORT MAILING LABEL - MAKE CHANGES AS NECESSARY



W-01751A Katherine Resort Water Company 6126 Chrismark Ave. San Diego, CA 92120

RECEIVED

ACC UTILITIES DIRECTOR

# ANNUAL REPORT Water

FOR YEAR ENDING

12 31 2009

FOR COMMISSION USE

ANN 04 09

A-19-10

#### **COMPANY INFORMATION**

Company Name (Business Name)	THERINE RESC	PRT WATER CO.
Mailing Address 6/26 CH  SANDIESO  (City)	ARISMARK,	AVENUE
SAN DIESO	CA	92120
(619) 2-86-0178  Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address	6	
Local Office Mailing Address		
(Stree	et)	
(City)	(State)	(Zip)
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address		
MANAC	GEMENT INFORMATIO	<u>ON</u>
☐Regulatory Contact:		
Management Contact: (". ED	SCHUETZ	GENERAL MAKE
Regulatory Contact:  Management Contact:  C. ED  (C) 126 CHRISMA  (Street)  (C) 19 286-0178  Telephone No. (Include Area Code)	(Name)	(Ittle) 92/50
(Street)	(City)	(State) (Zip)
(619) 286-0178	SAME	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)
Email Address		
BILLING CLERK On Site Manager: JUDIT.		72
7885 QUINCE	TR. LA MOH	CA 91441
, -,	70°	(State) (Zip)
(Street) 4(04-3978	(City)	(State) (Zip)

Statutory Agent: (1, ED				
6126 CHRISMA	12K AVF. SAN (City)	Diego (4 92/20		
(Street) (4/9) 1 + (0 - 0/7)	(City)	(State) (Zip)		
Telephone Ne. (Include Area Code)	Fax No. (Include Area Code	Cell No. (Include Area Code)		
Attorney: Only A	(Name)			
(Street)	(City)	(State) (Zip)		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)		
Email Address				
OWN	NERSHIP INFORMATIO	<u>N</u>		
Check the following box that applies to yo	our company:			
Sole Proprietor (S)	C Corporation (C) (Other than Association/Co-op)			
Partnership (P)	☐ Subchapter S Corporation (Z)			
Bankruptcy (B)	Association/Co-op (A)			
Receivership (R)	Limited Liability Company			
Other (Describe) OPPON	PATE SUBSIO	IARY DBA		
	COUNTIES SERVED	,		
Check the box below for the county/ies in	which you are certificated to pro	ovide service:		
□ АРАСНЕ	☐ COCHISE	COCONINO		
☐ GILA	☐ GRAHAM	GREENLEE		
☐ LA PAZ	☐ MARICOPA	MOHAVE		
☐ NAVAJO	☐ PIMA	☐ PINAL		
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUMA		
☐ STATEWIDE				

#### **UTILITY PLANT IN SERVICE**

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights	4000	0	0
304	Structures and Improvements	11009	8257	2752
307	Wells and Springs	766	576	190
311	Pumping Equipment	40772	40772	0
320	Water Treatment Equipment	4426	4426	0
330	Distribution Reservoirs and Standpipes	25668	18394	7274
331	Transmission and Distribution Mains	7190	5/06	2084
333	Services	1665	1247	418
334	Meters and Meter Installations	9825	8840	985
335	Hydrants		,	
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	200	169	31
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	105,521	87,787	17,734

This amount goes on the Balance Sheet Acct. No. 108-

#### CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation  Expense (1x2)
301	Organization	4000	0	0
302	Franchises	11009	3.33	367
303	Land and Land Rights	766	3.33	26
304	Structures and Improvements	40772	12.50	5097
307	Wells and Springs	4426	20.00	485
311	Pumping Equipment	25668	2.22	570
320	Water Treatment Equipment	7190	2.00	144
330	Distribution Reservoirs and Standpipes	1665	3.33	55
331	Transmission and Distribution Mains	9825	8,33	8/8
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	200	6.67	/3
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	105,521		7975

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_\_\_ Acct. No. 403.

#### **BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		
131	Cash	\$ O	\$ 0
134	Working Funds	20,856.40	10,825,19
135	Temporary Cash Investments	0	O VARIABLE  O AS NECESSARY
141	Customer Accounts Receivable	LARIABLE	1/ARIABLE
146	Notes/Receivables from Associated Companies	0	O
151	Plant Material and Supplies	AS NECESSARY	AS NECESSAR
162	Prepayments	0 '	C> '
174	Miscellaneous Current and Accrued Assets	6	0
	TOTAL CURRENT AND ACCRUED ASSETS	\$20,856.40	\$ 10,825.19
	FIXED ASSETS		
101	Utility Plant in Service	\$ 0	\$ 0
103	Property Held for Future Use	0	0
105	Construction Work in Progress	0	0
108	Accumulated Depreciation – Utility Plant	87, 787	90,000
121	Non-Utility Property	' 0	10
122	Accumulated Depreciation – Non Utility	0	0
	TOTAL FIXED ASSETS	\$ 87, 787	\$ 90,000
	TOTAL ASSETS	\$108,643,40	\$100,835.19

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

#### **BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF	
	LIABILITIES	YEAR	YEAR	
	CURRENT LIABILITES			
231	Accounts Payable (URRENT	\$ 3073	\$ 0	
232	Notes Payable (Current Portion)			
234	Notes/Accounts Payable to Associated Companies			
235	Customer Deposits			
236	Accrued Taxes			
237	Accrued Interest			
241	Miscellaneous Current and Accrued Liabilities			
	TOTAL CURRENT LIABILITIES	\$3073	\$ 0	
	LONG-TERM DEBT (Over 12 Months)			
224	Long-Term Notes and Bonds	\$ 91000	\$ 9,000	
·	DEFERRED CREDITS	,		
251	Unamortized Premium on Debt	\$10920	\$ 11466	
252	Advances in Aid of Construction			
255	Accumulated Deferred Investment Tax Credits			
271	Contributions in Aid of Construction			
272	Less: Amortization of Contributions			
281	Accumulated Deferred Income Tax			
	TOTAL DEFERRED CREDITS	\$10920	\$ 11466	
	TOTAL LIABILITIES	\$104993	\$ 10553	
	CAPITAL ACCOUNTS			
201	Common Stock Issued	\$	\$	
211	Paid in Capital in Excess of Par Value			
215	Retained Earnings			
218	Proprietary Capital (Sole Props and Partnerships)			
	TOTAL CAPITAL	\$	\$	
	TOTAL LIABILITIES AND CAPITAL	\$ 214,611	\$208,005	

#### COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR 24,375	CURRENT YEAR
461	Metered Water Revenue	\$ 0	\$ 21,878.74
460	Unmetered Water Revenue		0
474	Other Water Revenues		
	TOTAL REVENUES	\$ 24,375	\$ 21,878.74
	OPERATING EXPENSES		
601	Salaries and Wages	\$ 4800	\$ 1500
610	Purchased Water		
615	Purchased Power	/333	1,462
618	Chemicals		
620	Repairs and Maintenance	5292	3,403.62
621	Office Supplies and Expense	91	356,00
630	Outside Services	2062	7 459,79
635	Water Testing	2800	12,133.02
641	Rents	1200	1200
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense		3,952.52
403	Depreciation Expense	7915	8/60
408	Taxes Other Than Income	1173	1,282,00
408.11	Property Taxes	587	696.80
409	Income Tax		
	TOTAL OPERATING EXPENSES	\$ 27,308	\$ 31,905.95
	OPERATING INCOME/(LOSS)	\$ (1040)	\$ (10,027,21
	OTHER INCOME/(EXPENSE)		· ·
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income	Ψ	*
421	Miscellaneous Non-Utility Expenses		
420	Interest Expense		
421		\$	\$
	TOTAL OTHER INCOME/(EXPENSE)	Ψ	Ψ
	NET INCOME/(LOSS)	\$ (1040)	\$ (10,027.21)

#### SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued	1962	1992		
Source of Loan	DARENT (	e <sub>o</sub>		
ACC Decision No.	WA	NA		
Reason for Loan	INSTALL	NEW Sy	STEM TAM	es e famps
Dollar Amount Issued	\$60,000	/	\$	\$
Amount Outstanding	\$ 60,000	\$ 41,000	\$	\$
Date of Maturity	TOBE O	4 MORTIZ	FD	
Interest Rate	6%		%	%
Current Year Interest	\$ (LAIVED	\$UAWED	\$	\$
Current Year Principle	\$ <i>O</i>	\$ 0	\$	\$

Meter Deposit Balance at Test Year End	\$ 0	
Meter Deposits Refunded During the Test Year	\$ 0	

COMPANY NAME	LATHERINE RESORT WATER (00.
Name of System:	ADEQ Public Water System Number: 08-018

#### WATER COMPANY PLANT DESCRIPTION

#### **WELLS**

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
91.000315,000	20	100	450	10	3/4	1900
91.000315,000 91.000315,000	<i>20</i>	100	450	16	3/4	1900

<sup>\*</sup> Arizona Department of Water Resources Identification Number

#### **OTHER WATER SOURCES**

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)
114		

BOOSTER PUN	BOOSTER PUMPS		<b>DRANTS</b>
Horsepower	Quantity	Quantity Standard	Quantity Other
3	2	2	

STORAGE TA	NKS	PRESSUI	RE TANKS
Capacity	Quantity	Capacity	Quantity
1800	1	6000	/

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME	KATHERINE KESORT LLATER (10.
Name of System:	ADEQ Public Water System Number: 08-018

#### WATER COMPANY PLANT DESCRIPTION (CONTINUED)

J	MAINS				
Size (in inches)	Material		Length (in feet)		
2	TRAN	SITE	300		
3		7.	300 310 1680		
4	15	le	1680		
5					
6		•			
8					
10					
12					

#### **CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X <sup>3</sup> / <sub>4</sub>	42
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

For the following three items, list the utility owned assets in each category for each system.

TREATMENT EQUIPMENT: CHLORINE TREATMENT	
SYSTEM OVERED BY COMPANY	
STRUCTURES: CHLORINE EQUIPMENT HOUSED IN	
FIBERGLASS ENCLOSURE DUMPS STORAGE	
TANKS - DRESSURE TANK OWHED BY COMPANY	<del>/</del>
OTHER:  FLECTRICAL BOYES	

Note: If you are filing for more than one system, please provide separate sheets for each system.

COMPANY NAME:	KATHERINE	RESORT	MATER	No.	
Name of System:		ADEQ Public Wa	iter System Nun	nber: 08 - 018	

#### WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009

MONTH	NUMBER OF	GALLONS	GALLONS	GALLONS
	CUSTOMERS	SOLD	PUMPED	PURCHASED
		(Thousands)	(Thousands)	(Thousands)
JANUARY	42	120,750	122,700	0
FEBRUARY	42	94,200	95,500	0
MARCH	42	100,650	105,300	0
APRIL	42	151,500	156,940	0
MAY	42	171,300	174.751	0
JUNE	42	193,700	204,319	0
JULY	42	175,310	176,900	0
AUGUST	42	187,700	190,970	0
SEPTEMBER	42	145,900	149,079	0
OCTOBER	ifr	163,700	170, 804	0
NOVEMBER	42	90,700	91. 720	0
DECEMBER	42	142,100	143,210	0
	TOTALS →	1,737510	1,782,193	0

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME:	ATHERINE RESORT WATER GO.
Name of System:	ADEQ Public Water System Number: 08-018

#### UTILITY SHUTOFFS / DISCONNECTS

MONTH	Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY	/		<i>;</i>
FEBRUARY			7
MARCH		SOME WILL	
APRIL	/	SOME WILL SHUT OFF	/
MAY	7	WATER WHILE	/
JUNE	/	AUAT FOR	/
JULY		AUAY FOR THE SUMMER	/
AUGUST			
SEPTEMBER			
OCTOBER			
NOVEMBER			
DECEMBER			/
$TOTALS \longrightarrow$	·		

OTHER (description):				
			1.00	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	 		
		 -		

COMPANY NAME KATHERINE RESORT WATER CO. YEAR ENDING 12/31/2009

#### PROPERTY TAXES

Amount of actual property taxes paid during Calendar Year 2009 was: \$ 696.80
Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.
If no property taxes paid, explain why

# VERIFICATION AND SWORN STATEMENT Taxes

RECEIVED

FICATION		ACCUTUTE
STATE OF ARIZONA COUNTY OF (COUNTY NAME)	10HAVE	OTTENIES DIRECTOR
I, THE UNDERSIGNED  NAME (OWNER OR  NAME (OWNE	OFFICIAL) TITLE - BILL	ing COLERK
OF THE KATHERINE	RESORT 11 A	TER OO.
17		
DO SAY THAT THIS ANNUAL UTILITY PRO	OPERTY TAX AND	SALES TAX REPORT TO
ARIZONA CORPORATION COMMISSION		
MONT	H DAY	YEAR
FOR THE YEAR ENDING 12	31	2009
PERIOD COVERED BY THIS REMATTER AND THING SET FOR INFORMATION AND BELIEF.		
MATTER AND THING SET FOR INFORMATION AND BELIEF.  SWORN STATEMENT  I HEREBY ATTEST THAT ALL PROPI	TH, TO THE BE	EST OF MY KNOWLE
MATTER AND THING SET FOR INFORMATION AND BELIEF.  SWORN STATEMENT  I HEREBY ATTEST THAT ALL PROPI	TH, TO THE BEET TAXES FOR S.	EST OF MY KNOWLE
MATTER AND THING SET FOR INFORMATION AND BELIEF.  SWORN STATEMENT  I HEREBY ATTEST THAT ALL PROPI AND PAID IN FULL.  I HEREBY ATTEST THAT ALL SALES	TH, TO THE BE	EST OF MY KNOWLE
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MATTER AND THING SET FOR INFORMATION AND BELIEF.  SWORN STATEMENT  I HEREBY ATTEST THAT ALL PROPE AND PAID IN FULL.  I HEREBY ATTEST THAT ALL SALES PAID IN FULL.  SUBSCRIBED AND SWORN TO BEFORE ME	TAXES FOR SAID O	EST OF MY KNOWLE
MATTER AND THING SET FOR INFORMATION AND BELIEF.  SWORN STATEMENT  I HEREBY ATTEST THAT ALL PROPI AND PAID IN FULL.  I HEREBY ATTEST THAT ALL SALES PAID IN FULL.  SUBSCRIBED AND SWORN TO BEFORE ME  A NOTARY PUBLIC IN AND FOR THE COUNTY OF	ERTY TAXES FOR S.  TAXES FOR SAID (  SIGNATURE OF OWNER OF TELEPHONE NUMBER	AID COMPANY ARE CURI

## COMPANY NAME ATHERVINE LESORT (LATER CO. YEAR ENDING 12/31/2009

#### **INCOME TAXES**

CARRIED TO PARENT (00.
<u>C</u>
<u> </u>

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

#### CERTIFICATION

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

SIGNATURE

PRINTED NAME

-/0

TITLE

## VERIFICATION AND

	RECEIVED
ACC UTIL	TIZES DIRECTOR

**SWORN STATEMENT Intrastate Revenues Only VERIFICATION** COUNTY OF (COUNTY NAME) STATE OF ARIZONA NAME (OWNER OR OFFICIAL) TITLE I, THE UNDERSIGNED COMPANY NAME OF THE THER DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION MONTH DAY FOR THE YEAR ENDING 12 31 2009 HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS. PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. SWORN STATEMENT IN ACCORDANCE WITH THE REOUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-

401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2009 WAS:

> (THE AMOUNT IN BOX ABOVE 1. 282.07 INCLUDES \$ IN SALES TAXES BILLED, OR COLLECTED) MARGERIE ANNE O'NEIL Commission # 1856123 Notary Public - California San Diego County My Comm. Expires Jun 28. COUNTY NAME SAN DIEGO MONTH APRIL 20.10

Arizona Intrastate Gross Operating Revenues Only (\$)

\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

12th

DAY OF

(SEAL)

MY COMMISSION EXPIRES June 28, 2013

#### VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

**Intrastate Revenues Only** 

RECEIVED

ACC UTILITIES DIRECTOR

VERIFICATION

STATE OF	ARIZONA
----------	---------

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) 10HAVE

NAME (OWNER OR OFFICIAL)

COMPANY NAME

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH DAY YEAR 12 2009 31

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

#### SWORN STATEMENT

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2009 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

THE AMOUNT IN BOX AT LEFT INCLUDES \$ 1, 283.07

IN SALES TAXES BILLED, OR COLLECTED)

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED.

MARGERIE ANNE O'NEIL Commission # 1856123 Notary Public - California San Diego County

My Comm. Expires, Jun 28, 2013

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

**THIS** 

12th

DAY OF

NOTARY PUBLIC NAME.

MARGERIE ANNE O'NETL

COUNTY NAME SAN DIEGO

APRTI.

2010

(SEAL)

MY COMMISSION EXPIRES

June 28, 2013